

# Filling Out the New State of Maine "Blue Paper"

(revised September 2014)

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#### The goals of today's webinar are:

- A. To ensure that the September 2014 version is being used.
- B. To clarify that the information requires answers to the questions (i.e., what symptoms show mental illness, what behaviors caused by the illness show likelihood of serious harm).

#### Letter to Stakeholders from Guy Cousins

July 18, 2014

The Department of Health and Human Services has revised the Application for Emergency Involuntary Admission to a Mental Hospital (MH-100). As you may be aware, the commissioner is authorized by statute to develop the forms relating to commitment. The changes to the form are intended to address concerns raised by District Court judges, as well as advocates and others involved in the mental health system, about the quality of information provided on blue papers. Our hope is that changes to the form will assist preparers in providing necessary information from the start so that care will not be delayed by the need to supplement.

Changes include the following:

- The words "blue paper" appear on the caption, since, with some faxing for judicial signatures now allowed, the judicial signature does not always appear on a copy that is blue.
- The statutes now refer to a "psychiatric hospital" instead of a "mental hospital." The revised blue paper reflects that.
- Section 1 is revised to separate the applicant's observations about mental illness and likelihood of harm.
- Section 2 is revised so that symptoms of mental illness must be described separately from actions and behaviors (not symptoms) that show likely harm. The instructions on the back reinforce that the narrative information for any of the three kinds of harm must support the specific kind of harm (harm to self, harm to others, or inability to protect self from harm). And while section 2 retains a space for designating the least restrictive method of transportation, the instruction on the back notes that this can be N/A if the patient is already at a psychiatric hospital.
- Section 3 is revised to address the situation where the patient is already at the psychiatric hospital and no transportation is required.

Please find the new form attached to this communication. The form is also available on the DHHS website at

http://www.maine.gov/dhhs/samhs/mentalhealth/rights-legal/involuntary/forms.html.

The Department offers any necessary technical assistance to ensure implementation. Please let me know if you want to discuss this further.

Sincerely,

Luy R. Comin

Guy R. Cousins, LCSW, LADC, CCS
Director, Office of Substance Abuse and Mental Health Services (SAMHS)

1.	Application.					
	I hereby apply for emergency admission of  Proposed patient's FULL, printed name (first, middle, last)  gender  date of birth					
		B M.R.S.A. § 3863.		-	d patient has	
	Psychiatric hospital	·				
	mental illness because	ief about mental illness		, and as	a result poses	
	likelihood of serious harm because					
		Grounds for belief about likely harm, including nature of harm				
	Date Applicant's printed name	Applicant's signature		Applicant's	capacity	
	Name and address of proposed patient's guardian, spe	ouse, parent, adult ch	ild, next of kir	n, or friend	:	
2.	Certifying Examination. I hereby certify that:					
	(i) I am a licensed and that I examined			toda	ıy.	
	MD/DO/PhD/PA/NP/RN,CS	Proposed pa	dient.			
	<ul><li>(ii) My opinion is that the proposed patient has a men</li></ul>	ntal illness, exhibiting	the following	symptom:	s:	
	show that the proposed patient's illness poses a likeli  A. Describe threats of or attempts at suicide or serious s  B. Describe recent homicidal or violent behavior or rece	elf-inflicted harm				
	A. Describe threats of or attempts at suicide or serious s	elf-inflicted harm ent conduct placing others in to avoid risk or protect self i crees are unavailable f	n reasonable fear from severe physi or care and tr	of serious physical or mental h	sical harm harm the proposed	
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#### INSTRUCTIONS

#### Generally

- A. The application cannot be altered after it has been signed by an examiner or judicial officer.
- B. A psychiatric hospital is any hospital that is equipped to provide inpatient care and treatment for people with mental illness.
- C. The psychiatric hospital named in the application may decline to admit the person, in which event the transporting agency must return the proposed patient from the hospital.
- D. The application expires 3 days after the patient's admission to the hospital, except that if the third day is a weekend or holiday, the application expires on the next business day following the weekend or holiday.

#### Section 1

- A. Any health officer, law enforcement officer or other person may fill out section 1.
- B. The applicant should provide name and address of the proposed patient's guardian, spouse, parent, adult, next of kin, or (if none of those exists) friend so that the hospital can fulfill its obligation to notify that person.

#### Section 2

- A. The certifying examination must take place no more than two days before the person is admitted to the hospital.
- B. The certifying examiner must describe both symptoms of mental illness and actions or behaviors creating a likelihood of serious harm. The three boxes in subsection (iii) pertain to the three statutory bases for the finding of likelihood of serious harm. The certifying examiner must check at least one box and provide the narrative information about actions or behaviors to support the opinion that the person's mental illness creates a likelihood of harm.
- C. The grounds for the opinion about illness and harm may be based on personal observation or on history and information from other sources considered reliable by the examiner.
- D. If patient does not require transportation, subsection (v) may be noted as N/A.

#### Section 3

- A. Between 11:00 p.m. and 7:00 a.m., a proposed patient may be transported to the psychiatric hospital designated in section 3 and held for evaluation and treatment pending judicial endorsement if the endorsement is obtained as soon as possible outside those hours.
- B. The applicant must fill in the name of the transporter and the destination hospital before seeking judicial endorsement.

MH-100 Revised September 12, 2014

MH-100 Revised September 12, 2014

#### **General Instructions**

#### Generally:

- A. The application cannot be altered after it has been signed by an examiner or judicial officer.
- B. A psychiatric hospital is any hospital that is equipped to provide inpatient care and treatment for people with mental illness.
- C. The psychiatric hospital named in the application may decline to admit the person, in which event the transporting agency must return the proposed patient from the hospital.
- D. The application expires 3 days after the patient's admission to the hospital, except that if the third day is a weekend or holiday, the application expires on the next business day following the weekend or holiday.

#### **Section 1. Application**

1. Application.			
I hereby apply for emergency admission	on of Proposed patient's FULL printed name (first, middle, las	tt) gender date of birth	
toPsychiatric hospital	under 34-B M.R.S.A. 3863. I believe that	at the proposed patient has a	
mental illness because	Grounds for belief about mental illness	, and as a result poses a	
likelihood of serious harm because	Grounds for belief about likely harm, including na	ture of harm	
Date Applicant's printed name	ne Applicant's signature	Applicant's capacity	
Name and address of proposed patient'	's guardian, spouse, parent, adult child, next of	kin, or friend:	

**General Instructions: Section 1** 

- A. Any health officer, law enforcement officer or other person may fill out section 1.
- B. The applicant should provide the name and address of the proposed patient's guardian, spouse, parent, adult, next of kin, or (if none of those exists) friend so that the hospital can fulfill it's obligation to notify that person.

#### **Section 2. Certifying Examination**

2. Certifying Exam	ination. I hereby certify that:	
	and that I examined /PhD/PA/NP/RN,CS	today. Proposed patient
	,	tal illness, exhibiting the following <b>symptoms</b> :
	title proposed patient has a men	tai inness, exhibiting the following <b>symptoms</b> .
		actions and behaviors (not symptoms), described below, nood of serious harm under paragraph A, B or C.
	of or attempts at suicide or serious self-in	
	nomicidal or violent behavior or recent co	onduct placing others in reasonable fear of serious physical harm
	pehavior and how it shows inability to avo	oid risk or protect self from severe physical or mental harm
(iv) I have confirmed patient's mental illne	· · · · · · · · · · · · · · · · · · ·	rces are unavailable for care and treatment of the proposed
(v) I believe that the	least restrictive form of transport	eation for the proposed patient's clinical needs is
Ambulance or other (p	lease specify)	
Date Tii	ne Examiner's printed i	name Examiner's signature

**General Instructions: Section 2** 

- A. The certifying examination must take place no more than two days before the person is admitted to the hospital.
- B. The certifying examiner must describe both symptoms of mental illness, and actions or behaviors creating a likelihood of serious harm. The three boxes in subsection (iii) pertain to the three statutory bases for the finding of likelihood of serious harm. The certifying examiner must check at least one box and provide the narrative information about actions or behaviors to support the opinion that the person's mental illness creates a likelihood of harm.
- C. The grounds for the opinion about illness and harm may be based on personal observation, or on history and information from other sources considered reliable by the examiner.
- D. If patient does not require transportation, subsection (v) may be noted as N/A.

#### Section 3. Judicial Review and Endorsement

3. Judicial Review and Endorsement.				
I find this application and certificate to be regular and in	n accordance with law. The	proposed patient may be		
admitted to If the particle is a specific possible in the particle in the particle is a specific possible in the particle in the particle is a specific possible in the particle in the particle is a specific possible in the particle in the partic	proposed patient is not curre	ently at that hospital,		
is authorized to take the proposed patient into custody and transport Person authorized to take proposed patient into custody the proposed patient to that hospital.				
Date Time Judicial officer's printed name	Judicial officer's signature	(District, Probate or Superior Court Judge or Justice; Justice of the Peace)		

**General Instructions: Section 3** 

- A. Between 11:00 p.m. and 7:00 a.m., a proposed patient may be transported to the psychiatric hospital designated in section 3 and held for evaluation and treatment pending judicial endorsement if the endorsement is obtained as soon as possible outside those hours.
- B. The applicant must fill in the name of the transporter and the destination hospital before seeking judicial endorsement.

#### **Detailed Instructions**

To support an emergency involuntary hospitalization, a blue paper must describe the proposed patient's actions, and the basis for a conclusion that harm is likely as a result of mental illness. The form itself contains the conclusions necessary to satisfy the law. By signing the form, the individuals filling it out are agreeing with those conclusions. The individual does not need to write in the conclusions. The form does NOT, however, contain the specific facts that support the conclusions. That is what the individuals filling in the form must provide.

The applicant who fills out **section 1** must provide information sufficient to show the grounds for (i.e., the facts that support) a lay opinion that that the individual is mentally ill and therefore poses a likelihood of serious harm. The grounds provided must be more than conclusory statements that the person is mentally ill and poses a likelihood of harm.

#### **Detailed Instructions (continued)**

The medical practitioner who fills out and certifies **section 2** must first determine which of three conclusions about likelihood of harm is applicable: does the person pose a likelihood or harm because of:

- 1. a substantial risk of physical harm to the person as manifested by recent threats of, or attempts at, suicide or serious self-inflicted harm (in shorthand, harm to self or paragraph A)
- 2. a substantial risk of physical harm to other persons as manifested by recent homicidal or violent behavior, or by recent conduct placing others in reasonable fear of serious physical harm (in shorthand, harm to others, or paragraph B), or
- 3. a reasonable certainty that the person will suffer severe physical or mental harm as manifested by recent behavior demonstrating an inability to avoid risk, or to protect the person adequately from impairment or injury (in shorthand, **inability to care for self**, or paragraph C).

#### **Detailed Instructions (continued)**

Then the practitioner must describe facts sufficient to support his or her professional opinion that the individual is mentally ill and therefore poses the identified likely harm. The information must describe symptoms of the illness, and actions and behaviors caused by the illness that show the harm. The practitioner may rely on his or her own observations or on reliable information provided by others as the facts that support the practitioner's conclusion that the individual is mentally ill and therefore poses a likelihood of harm.

Below are some examples of descriptions from blue papers, with a discussion of their adequacy to satisfy the legal requirements.

**Detailed Instructions: Section 1 - Application** 

Paint a picture for the medical practitioner and the judicial officer.

"I believe that the proposed patient has a mental illness because [grounds for belief about mental illness]."

- ... he has a diagnosis of \_\_\_\_\_\_.
- ... he has been committed on the basis of mental illness in the past.
- ... he has a prescription for psychiatric medications.
- ... he is not making sense when he talks.
- ... he appears to be answering inner voices.

**Detailed Instructions: Section 1 - Application** 

Paint a picture for the medical practitioner and the judicial officer.

"... and as a result poses a likelihood of serious harm because [grounds for belief about likely harm, including nature of harm]."

- ... he is threating to kill himself.
- ... he is threatening to harm others.
- ... he can't answer questions or make any sense.
- ... his home is filled with feces and trash.

**Detailed Instructions: Section 2 - Certifying Examination** 

Provide a clinical assessment based on symptoms and specific behaviors, articulating the facts about the behaviors so the judicial officer can understand how the mental illness and behaviors create a risk of harm.

"... patient has a mental illness, exhibiting the following symptoms:"

- Psychosis
- Hallucinations
- Mania
- Pressured speech
- Muteness
- Delusions (describe them)
- Disorganized thought and impaired judgment
- Etc.

**Detailed Instructions: Section 2 - Certifying Examination** 

Provide a clinical assessment based on symptoms and specific behaviors, articulating the facts about the behaviors so the judicial officer can understand how the mental illness and behaviors create a risk of harm.

"... recent actions and behaviors (not symptoms), described below, show that ... illness poses a likelihood of serious harm..."

Paragraph A: "... serious threats of or attempts at suicide or serious self-inflicted harm."

Statement	Discussion	Acceptable Alternative
He says he'll kill himself.	Okay	
He cut his wrists with a razor.	Okay	
He jumped off a bridge.	Okay	
He is hallucinating.	Conclusion with no actions or behaviors described.	He told me that he must purify himself by releasing his blood
He is delusional.	Conclusion with no actions or behaviors described.	He believes that he is Jesus, and plans to walk on the river in lead boots to prove it.

**Detailed Instructions: Section 2 - Certifying Examination** 

**Paragraph B:** "... recent homicidal or violent behavior or conduct placing others in reasonable fear of serious harm."

Statement	Discussion	Acceptable Alternative
He acts threatening.	This is a vague, conclusory	He got in his car screaming, and
	statement	threatened to run his neighbor over.
He is assaultive.	This is a conclusory statement that	He hit [pushed, spit at, tripped, etc.]
	doesn't adequately describe the	group home staff.
	actions or behaviors that led to the	OR
	conclusion.	He hit group home staff in the past
		and is threatening to do it again.
He is delusional.	Delusions alone to not demonstrate	He believes that he is an FBI agent
	risk of harm.	and must assassinate the next
		person who walks through the
		door.
He was harassing people.	Whether there was harassment is a	He was yelling obscenities at people
	conclusion that doesn't adequately	and lunging at them.
	describe the actions or behaviors	
	that led to the conclusion.	

**Detailed Instructions: Section 2 - Certifying Examination** 

**Paragraph C:** "... recent behavior and how it shows inability to avoid risk or protect self from severe physical or mental harm."

Statement	Discussion	Acceptable Alternative
He is unable to care for	That is a conclusory statement without facts to support	He cannot shower, eat, dress,
himself.	it.	or take his diabetes medicine
		alone, and won't accept help.
He has disorganized	This isn't behavior. Further, disorganization doesn't	He is unable to communicate
thought processes	necessarily make people dangerous.	his needs because his
		thoughts and speech are so
		disorganized.
He has poor impulse	That, without more, doesn't show likelihood of serious	He was running down the
control.	harm.	street naked at midnight.
He has poor insight	This isn't behavior. Many people without insight into	
into his illness.	their illness manage in the community without posing a	
	likelihood of serious harm. There must be recent	
	behavior resulting from the illness and showing risk of	
	harm.	
He has stopped taking	That without more doesn't show likelihood of serious	
his meds.	harm.	

**Questions?** 

Maine SAMHS Webpage: Rights and Legal Issues - Involuntary Hospitalization http://www.maine.gov/dhhs/samhs/mentalhealth/rights-legal/involuntary/faq/home.html

#### **Contact Information**

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